# The Dunnell Telephone Company P O Box 728 Judson TX 75660 Office: (903) 663-0099 Fax: (713) 634-2643

June 22, 2015

Charlie D. Mattingly
President
The Dunnell Telephone Company
c/o VNC Enterprises
235 Dennard Street
Longview, TX 75605
P.O. Box 733
Judson, TX 75660
(903)663-0099

Marlene H. Dortch Secretary Federal Communications Commission 445 12<sup>th</sup> Street, SW Washington, D.C. 20554

RE: REQUEST FOR CONFIDENTIAL TREATMENT: Connect America Fund; High Cost Universal Service Support IN WC DOCKET NOS. 10-90, 07-135, 05-337, 03-109, CC DOCKET NOS. 01-92, 96-45, GN DOCKET NO. 09-51, WT DOCKET NO. 10-208, BEFORE THE FEDERAL COMMUNICATIONS COMMISSION

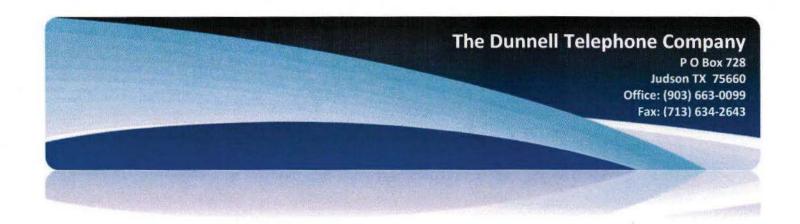
# Dear Ms. Dortch:

Please find attached with this letter a request for confidential treatment for portions of information submitted with our company Form 481 along with four copies. Contemporaneously, we are filing a copy of the redacted Form 481, with redacted attachments, via ECFS. This information has also been filed with our state commission and electronically submitted, and certified, with the Universal Service Administration Company. If you have any questions or concerns with the attachments, please contact Charles Curtis at <a href="mailto:Charles.curtis@contaegis.com">Charles.curtis@contaegis.com</a> or by phone at 252-514-2203.

Sincerely,

Charlie Mattingly

Cc: file



# Before the FEDERAL COMMUNICATIONS COMMISSION Washington, D.C. 20554

In the Matter of	)	#
Connect America Fund	)	WC Docket No. 10-90
	)	WC Docket No. 07-135
High-Cost Universal Service Support	)	WC Docket No. 11-42
	)	WC Docket No. 05-337
Lifeline and Link Up Reform	)	WC Docket No. 03-109
	)	CC Docket No. 01-92
	)	CC Docket No. 96-45
	)	GN Docket No. 09-51
	)	WT Docket No. 10-208

# REQUEST FOR CONFIDENTIAL TREATMENT

The Nova Telephone Company ("Filer") requests that the portions of its Form 481 pertaining to its Five Year Plan in the Service Quality Improvement Reporting, its Tribal Land Offerings documentation and its Rate of Return Additional Documentation (RUS Annual Report) be granted confidential, non-public treatment pursuant to Sections 0.457 and 0.459 of the Commission's rules, 47 C.F.R. Sections 0.457, 0.459, and related provisions of the Freedom of Information Act ("FOIA"), including 5 U.S.C. Section 552(b)(4) ("Exemption 4"). Form 481 contains information regarding the Filer's capital expenditure budgets, detailed network information as well as sensitive financial information filed in the Rate of Return Documentation. Release of such information would supply its competition sensitive commercial information that would undermine its ability to serve its customers effectively. Such information is not customarily disclosed to the public or made available within the telecommunications industry. Therefore, the Filer requests confidentiality of these respective portions of its Form 481 filing be granted. Support for the Filer's request for confidential treatment pursuant to FCC rules in Section 0.459(b) is provided as follows:

- I. FILER'S FORM 481 SATISFY THE REQUIREMENTS OF SECTION 0.459 OF THE COMMISSION'S RULES The material the Filer seeks confidentiality qualifies for the requirements outlined in Section 0.459 if the FCC's rules. As will be demonstrated, the Filer has satisfied all the elements of this section, concluding that disclosure of this information would be harmful to the Filer.
  - (1) Identification of the specific information for which confidential treatment is sought. The Filer requests confidential treatment for the portions of the Form 481 required by 47 C.F.R. Section 54.313(a)(2) and (4). The Form bears the legend "CONFIDENTIAL INFORMATION SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NO.'S 10-90, 07-135, 05-337, 03-109, CC DOCKETS 01-92, 96-45, GN DOCKET NO. 09-51, WT

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DOCKET NO. 10-208, BEFORE THE FEDERAL COMMUNICATION COMMISSION." The specific information considered confidential include: 1) The Filer's 5 year capital budget and network information associated with Service Quality Improvement Reporting (100), 2) ROR Additional Documentation which represents financial reports for calendar year 2014 (3005).

- (2) Identification of the Commission proceeding in which the information was submitted or a description of the circumstances giving rise to the submission. The information is required to be produced annually in accordance with 47 C.F.R. Section 54.313(a). The proceedings are WC Docket No. 10-90 and WC Docket No. 11-42.
- (3) Explanation of the degree to which the information is commercial or financial, or contains a trade secret or is privileged. The information requested for confidential treatment is information not customarily released to the public. Release of this information would have the effect of substantial harm to the competitive position of the Filer.
- (4) Explanation of the degree to which the information concerns a service that is subject to competition.
  All of the services provided by the Filer are subject to competition.
- (5) Explanation of how disclosure of the information could result in substantial competitive harm. Identification of network details could enable wrongdoers the ability to compromise network reliability to customers. In addition, competitive entities in the Filer's area would have access to sensitive network, strategic and financial details that would hamper the Filer's ability to effectively compete.
- (6) Identification of any measures taken by the submitting party to prevent unauthorized disclosure. The information filed is not customarily released to the public or publically made available within the telecommunications industry. The information is also only released within internal circulation, including its attorneys, consultants and engineers, held to confidentiality agreements. The request as well as the associated documents subject to it, are filed both paper copy as well as electronically.
- (7) Identification of whether the information is available to the public and the extent of any previous disclosure of the information to third parties. None of the information requesting confidential treatment is available to the public and have not been disclosed to parties unless those parties are engaged to perform services for the Filer, under non-disclosure.
- (8) Justification of the period during which the submitting party asserts that material should not be available for public disclosure. Due to the fact that the nature of the information being filed is sensitive in terms of competitive and public safety concerns, the Filer requests that confidential treatment be granted indefinitely.

# II. CONCLUSION

For these reasons, pursuant to Sections 0.457 and 0.459 of the Commission's rules, the Filer requests that the portions of Form 481 relating to those particular items listed in I.1, above, be treated as confidential under the Commission's rules and precedent and withheld from public inspection and that any distribution of them within the Commission should be limited, in accordance with the reasons stated for confidential

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request. In the case where any person, party or entity wishes to access any of this information, the Filer requests immediate notification so it can have the opportunity to oppose the request or consider any other action it deems necessary to protect both its network, strategic and financial interests and the interest of the customers it continues to serve.

Respectfully Submitted,

Charlie D. Mattingly

President

The Dunnell Telephone Company

c/o VNC Enterprises

235 Dennard Street

Longview, TX 75605

P.O. Box 733

Judson, TX 75660

(903)663-0099

June 22, 2015

FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3 July 2013	060-0986/OMB Control No. 3060-0819
<010>	Study Area Code	361381		
<015>	Study Area Name	DUNNELL TEL CO		
<020>	Program Year	2016		
<030>	Contact Name: Person USAC should contact with questions about this data	Stephanie Curtis		
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2525142203 ext.2		
<039>	Contact Email Address: Email of the person identified in data line <030>	stephanie@contaegi	s.com	
ANNU/	AL REPORTING FOR ALL CARRIERS			54.313 54.422 Completion Completion Required Required (check box when complete)
<100>	Service Quality Improvement Reporting		(complete attached worksheet)	~
<200>	Outage Reporting (voice)		(complete attached worksheet)	V
<210>	< check box if no	outages to report		V
<300>	Unfulfilled Service Requests (voice)			
<310>	Detail on Attempts (voice)			
<b>\310</b> 2	Detail of Accemps (voice)		(attach description	ve document)
<320>	Unfulfilled Service Requests (broadband)			
<330>	Detail on Attempts (broadband)		(attach descript	live document)
<400>	Number of Complaints per 1,000 customers (voice)			
<410>	Fixed			
<420>	Mobile			
<430> <440>	Number of Complaints per 1,000 customers (broads	pand)		~
<450>	Mobile			
<500>	Service Quality Standards & Cons	pliance	(check to indicate certification)	V V
	361381mn510.pdf			
<510>			(attached descriptive document)	V V
	100			
<600>	Functionality in Emergency Situations	1000	(check to indicate certification)	
	361381mn610.pdf			
			(attached descriptive document)	V V
<610>				
<700>	Company Price Offerings (voice)		(complete attached worksheet)	V
<710>	Company Price Offerings (broadband)		(complete attached worksheet)	
<800>	Operating Companies and Affiliates		(complete attached worksheet)	V
<900>	Tribal Land Offerings (Y/N)?	- 0	yes, complete attached worksheet)	
<1000>	Voice Services Rate Comparability Certification		/es	
	361381mn1010.pdf			
<1010>			(attach descriptive document)	~
<1100>	· Certify whether terrestrial backhaul options exist (Y	es or No) 🔘 🕻	(if not, check to indicate certification)	V
<1110>			(complete attached worksheet)	
<1200>	Terms and Condition for Lifeline Customers		(complete attached worksheet)	
	Price Cap Carriers, Proceed to Price Cap Additional	THE ST DESIGN	The state of the s	
2000>	Including Rate-of-Return Carriers affiliated with Pri	ce Cap Local Exchang	e Carriers (check to indicate certification)	
2005>			(complete attached worksheet)	
000	Rate of Return Carriers, Proceed to ROR Additional	Documentation World		
3000>			(check to indicate certification) (complete attached worksheet)	-
			Leonipiere mindenen worksneed)	

	rvice Quality Improvement Reporting Ilection Form			FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	361381		
<015>	Study Area Name	DUNNELL TEL CO		
<020>	Program Year	2016		
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Curtis		
<035>	Contact Telephone Number - Number of person identified in data line <030>	2525142203 ext.2		
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie@contaegi	s.com	
<110>	Has your company received its ETC certification from the FCC?  If your answer to Line <110> is yes, do you have an existing §54.202(a) "5	(yes / no )	00	
<111>	year plan" filed with the FCC?	(yes / no )	00	
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your co CETC which only receives frozen support, your progress report is only		81mn112.pdf	
	required to address voice telephony service.			
	Please select the appropriate responses below (Yes, No, Not Applicable) to confire that the attached document(s), on line 112, contains a progress report on its five-service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	year		Name of Attached Document
<113>	Maps detailing progress towards meeting plan targets		Yes	
<114>	Report how much universal service (USF) support was received		Yes	
<115>	How much (USF) was used to improve service quality and how support was used to improve	e service quality	Yes	7
<116>	How much (USF) was used to improve service coverage and how support was used to improve	ove service coverage	Yes	1
<117>	How much (USF) was used to improve service capacity and how support was used to improve	ve service capacity	Not Applicable	1
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	state - 200 (1990)(1990 (1990)(1990 (1990)(1990 (1990)(1990 (1990 (1990 (1990)(1990 (1990)(1990 (1990)(1990 (1990)(1990)(1990)(1990 (1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)(1990)	Yes	1

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	361381
<015>	Study Area Name	DUNNELL TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Curtis
<035>	Contact Telephone Number - Number of person identified in data line <030>	2525142203 ext.2
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie@contaegis.com

	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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	ce Offerings including Voice Rate Data lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	361381	
<015>	Study Area Name	DUNNELL TEL CO	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Curtis	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2525142203 ext.2	
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie@contaegis.com	
<701>	Residential Local Service Charge Effective Date 1/1/2015		

<a1< th=""><th>&gt;</th><th><a2></a2></th><th><a3></a3></th><th><b1></b1></th><th><b2></b2></th><th><b3></b3></th><th><b4></b4></th><th><bs>&lt;</bs></th><th><c> <c> <c> <c> <c> <c> <c> <c> <c> <c></c></c></c></c></c></c></c></c></c></c></th></a1<>	>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<bs>&lt;</bs>	<c> <c> <c> <c> <c> <c> <c> <c> <c> <c></c></c></c></c></c></c></c></c></c></c>
Stat	te	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
			· ·						
					-				
					See a	tached worksheet			
								*	

(710) Broadband Price Offerings Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	361381	
<015> Study Area Name	DUNNELL TEL CO	
	2.000	

<020>	Program Year			2016						
<030>	Contact Name - Person U	Stephanie Curt	Stephanie Curtis 2525142203 ext.2							
<035>	Contact Telephone Numb	2525142203 ext								
<039>	Contact Email Address - E	Email Address of person identif	fied in data line <030>	stephanie@cont	aegis.com					
<711>	<al></al>	<a2></a2>	<b15< td=""><td><b2></b2></td><td>(a)</td><td><d1></d1></td><td><d2></d2></td><td><d3></d3></td><td><d4></d4></td></b15<>	<b2></b2>	(a)	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>	
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select	

State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
			See attac worksheet -	ned				
	- 141							

	lection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		361381	
<015>	Study Area Name		DUNNELL TEL CO	
<020>	> Program Year		2016	
<030>	Contact Name - Person	USAC should contact regarding this data	Stephanie Curtis	
<035>	Contact Telephone Nun	nber - Number of person identified in data line <030>	2525142203 ext.2	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	stephanie@contaegis.com	
<810>	Reporting Carrier	Dunnell Telephone Company		
<811>	Holding Company	KCL, LLC		
<812>	Operating Company	Dunnell Telephone Company		

<a1></a1>	<82>	<a>3&gt;</a>
Affiliates	SAC	Doing Business As Company or Brand Designation
	× -	

	al Lands Reporting ection Form		FCC Form 481 OMB Control No. 30 July 2013	060-0986/OMB Control No. 3060-08	819
<010>	Study Area Code	361381			
<015>	Study Area Name	DUNNELL TEL CO			
<020>	Program Year	2016			
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Curtis			
<035>	Contact Telephone Number - Number of person identified in data line <03				
<039>	Contact Email Address - Email Address of person identified in data line <03	0> stephanie@contaegis.	. com		
<910>	Tribal Land(s) on which ETC Serves		- III III II		
<920>	Tribal Government Engagement Obligation		Name of Attached Document		
	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes				
	rm the status described on the attached document(s), on line 920,	Select			
	trates coordination with the Tribal government pursuant to 8(a)(9) includes:	Yes or No or Not Applicable			
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.				
<922>	Feasibility and sustainability planning;				
<923>	Marketing services in a culturally sensitive manner;				
<924>	Compliance with Rights of way processes				
<925>	Compliance with Land Use permitting requirements				
<926>	Compliance with Facilities Siting rules				
<927>	Compliance with Environmental Review processes	-			
<928>	Compliance with Cultural Preservation review processes				
	The state of the s				

	o Terrestrial Backhaul Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	361381	
<015>	Study Area Name	DUNNELL TEL CO	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Curtis	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2525142203 ext.2	
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie@contaegis.com	
<1120>	Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).	а	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the		

**Redacted-For Public Inspection** 

Lifeline	erms and Condition for Lifeline Customers		FCC Form 481 OMB Control No. 3060-0986/OMB Co July 2013	ontrol No. 3060-0819
<010>	Study Area Code	361381		
<015>	Study Area Name	DUNNELL TEL CO		
<020>	Program Year	2016		
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Curtis		
<035>	Contact Telephone Number - Number of person identified in data line <030>	2525142203 ext.2		
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie@contaegis.com		
		361381mn1210.pdf		
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans			
			Name of Attached Document	
<1220>	Link to Public Website			
or the we	heck these boxes below to confirm that the attached document(s), on line 1210, bsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report:			
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,			
<1222>	Details on the number of minutes provided as part of the plan,			
<1223>	Additional charges for toll calls, and rates for each such plan.		7	

	ice Cap Carrier Additional Documentation	FCC Form 481	
	ection Form	OMB Control No. 3060-0986/	OMB Control No. 3060-0819
ncluding	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013	
<010>	Study Area Code	Market and the second s	
<015>	Study Area Name	361381	
<020>	Program Year	DUNNELL TEL CO	
<030>	Contact Name - Person USAC should contact regarding this data	2016	
<035>	Contact Telephone Number - Number of person identified in data line <030>	Stephanle Curtis	
<039>	Contact Email Address - Email Address of person identified in data line <030>	2525142203 ext.2	
- America		stephanie@contaegis.com	
			#
	집 [10] 그리고 있다면 하는 것이 되었다. 그리고 있는 것이 되었다면 하는 것이 되었다면 하는 것이 되었다. 하는 것이 없는 것이 없는 것이 없는 것이 없어 없는 것이 없다면 없다면 없다.	s a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to o mation reported on this form and in the documents attached below is accurate.	fiset access charge reduction
	Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1)i)		
<2011a>	12 Sec. 1 12 4 4 4 5 5 1 4 7 1 2 5 1 7 1 7 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1		
	TO COMPANY AND		
<2011b>	Attachment {47 CFR § 54.313(b)(1)ii}		
		Name of Attached Document(s) Listing Required Information	
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))		
<2012>	HT - (2) 전문 (1) 전문 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
<2013>			
<2014>	3 [전경영영 전 바퀴 집일 [고양 [대기 전기 전기 전기 전기 전기 전기 기계		
<2015>	2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))		
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
	Continue Consent Hand to Build Broadhand		
<2016>	Certification Support Used to Build Broadband	Market and the second s	
<2016>	The state of the s		
<2017>	Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification		
<2017> <2018:	Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification		
<2017>	Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification		
<2017> <2018:	Connect America Phase II Reporting (47 CFR § 54.313(e))  3rd year Broadband Service Certification  5th year Broadband Service Certification Interim Progress Certification  Please check the box to confirm that the attached document(s), on line	ine 2021, contains the required information	
<2017> <2018: <2019:	Connect America Phase II Reporting (47 CFR § 54.313(e))  3rd year Broadband Service Certification  5th year Broadband Service Certification Interim Progress Certification  Please check the box to confirm that the attached document(s), on lit pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II supports	shall provide the number, names, and	
<2017> <2018: <2019:	Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification Interim Progress Certification Please check the box to confirm that the attached document(s), on lingursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support saddresses of community anchor institutions to which began providing	shall provide the number, names, and	
<2017> <2018: <2019:	Connect America Phase II Reporting (47 CFR § 54.313(e))  3rd year Broadband Service Certification  5th year Broadband Service Certification Interim Progress Certification  Please check the box to confirm that the attached document(s), on lit pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II supports	shall provide the number, names, and	
<2017> <2018: <2019:	Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification Interim Progress Certification Please check the box to confirm that the attached document(s), on lingursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II supports addresses of community anchor institutions to which began providing preceding calendar year.	shall provide the number, names, and	

	te Of Return Carrier Additional Documentation ection Form		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
010>	Struck Assoc Code	22134	
015>	Study Area Code Study Area Name	JUNNELL TEL CO	
020>	Program Year	2016	
030>	Contact Name - Person USAC should contact regarding this data	Stephanie Curtis	
035>	Contact Telephone Number - Number of person identified in data line <030>	2525142203 ext.2	
039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie@contaegis.com	
IECK t	he boxes below to note compliance on its five year service quality plan (pursua) CFR 6 54.313ifH2). I further certify that the	nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring the information reported on this form and in the documents attai	
		361381mn3010.pdf	
010)	Progress Report on 5 Year Plan		
	Milestone Certification (47 CFR § 54.313(f)(1)(i))		
		Name of Attached Document Listing Required Inform	mation
	Please check this box to confirm that the attached document(s), on line 3 § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addn providing access to broadband service in the preceding calendar year.		<b>V</b>
		361381mn3012.pdf	
(012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))		
0/2/2V1		Name of Attached Document Listing Required Information	
013)	[일] 하는 이번 이번 경험하고 하는 것이 되어 있는 것이다. 살림생이나 아이를 내려지고 하는 것이다. 그런 그는 것이다는 생각이 하는데 아이를 하는데	(Yes/No)	<b>₹</b> ₩
	If yes, does your company file the RUS annual report	4	<b>J</b> •
ease	check these boxes to confirm that the attached document(s), on line 301	7, contains the required information pursuant to § 54.313(f)	(2) compliance requires:
1015)	Electronic copy of their annual RUS reports (Operating Report for		
	Telecommunications Borrowers)	- Firm	
1016)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	ish Flows	<del></del>
1017)	if the response is yes on line 3014, attach your company's RUS annual report and all required documentation		
		Name of Attached Document Listing Required Information	
3018)	If the response is no on line 3014, Is your company audited?	(Yes/No)	
	If the response is yes on line 3018, please check the boxes below to		
3019)	confirm your submission, on line 3026 pursuant to § 54.3.13(f)(2), contains Either a copy of their audited financial statement; or (2) a financial report in a f	ormat comparable to RUS Operating Report for Telecommunication	ons T
	Document(s) for Balance Sheet, Income Statement and Statement of C		
(020)			. =
3021)	Management letter and audit opinion issued by the independent certified p	ublic accountant that performed the company's financial audit	
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:		
3022)	Copy of their financial statement which has been subject to review by an		[7]
	independent certified public accountant; or 2) a financial report in a		
	format comparable to RUS Operating Report for Telecommunications		
	Borrowers,		
023)	Underlying information subjected to a review by an independent certified		
1024	public accountant		<u></u>
(024) (025)	Underlying information subjected to an officer certification.  Document(s) for Balance Sheet, Income Statement and Statement of C	ash Flows	T.
-	The state of the s	361381mn3026.pdf	
			1
3026)	Attach the worksheet listing required information		

(3000) Rate Of Return Carrier Additional Documentation (Continued)			FCC Form 481
Data Collection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2013

y Area Name	DUNNELL TEL CO
	DUMNELL IDE CO
ram Year	2016
act Name - Person USAC should contact regarding this data	Stephanie Curtis
act Telephone Number - Number of person Identified in data line <030>	2525142203 ext.2
act Email Address - Email Address of person identified in data line <030>	stephanie@contaegis.com
ac	t Name - Person USAC should contact regarding this data t Telephone Number - Number of person identified in data line <030>

#### **Financial Data Summary**

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



	ion - Reporting Carrier ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control July 2013	No. 3060-0819
<010>	Study Area Code	361381	
<015>	Study Area Name	DUNNELL TEL CO	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Curtis	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2525142203 ext,2	
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie@contaegis.com	

# TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients			
certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.			
Name of Reporting Carrier:			
Signature of Authorized Officer:	Date		
Printed name of Authorized Officer:			
Title or position of Authorized Officer:			
Telephone number of Authorized Officer:			
Study Area Code of Reporting Carrier:	Filing Due Date for this form:		
Persons willfully making false statements on this form car	be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonmen under Title 18 of the United States Code, 18 U.S.C. § 1001.		

	ion - Agent / Carrier ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	361381
<015>	Study Area Name	DUNNELL TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Curtis
<035>	Contact Telephone Number - Number of person identified in data line <030>	2525142203 ext.2
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie@contaegis.com

# TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) Charles Curtis is authorized to submit the information reported on behalf of the reporting carrier, also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.			
Name of Authorized Agent: Charles Curtis			
Name of Reporting Carrier: DUNNELL TEL CO			
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/26/2015		
Printed name of Authorized Officer: Charles Mattingly			
Title or position of Authorized Officer: President			
Telephone number of Authorized Officer: 9036630099 ext.			
Study Area Code of Reporting Carrier: 361381	Filing Due Date for this form: 07/01/2015		

# TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier  I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Authorized Agent or Employee of Agent: Charles Curtis	
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date: 06/25/2015
rinted name of Authorized Agent or Employee of Agent: Charles Curtis	
Title or position of Authorized Agent or Employee of Agent President	A CONTRACTOR OF THE PROPERTY O
elephone number of Authorized Agent or Employee of Agent: 9036630099 ext.	
Study Area Code of Reporting Carrier: 361381 Filing Due Di	ate for this form: 07/01/2015